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		Effect	ive Octobe		X13-12-0000113-01-1									
		CLAIMS AS	S FILED - (Column		SMALL EN	ITITY	OR	OTHER SMALL I						
TC	TAL CLAIMS		31		. .			RATE	FEE		RATE	FEE		
FO	R		NUMBER F	ILED	NUMB	R EXTRA	,	BASIC FEE	355.00	OR	BASIC FEE	710.00		
то	TAL CHARGEA	BLE CLAIMS	31 min	us 20=	• /	1		X\$ 9=		OR	X\$18=	198		
IND	EPENDENT CL	AIMS	g mir	nus 3 =	5		. !	X40=		OR	X80=	400		
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT					+135=		OR	+270=	7.00		
* If	the difference	in column 1 is	less than ze		TOTAL		OR	TOTAL	1308					
	C	LAIMS AS A	MENDED		SMALL	ENTITY	OR	OTHER SMALL	THAN					
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	umn 2) (Column 3 GHEST IMBER PRESENT VIOUSLY EXTRA			RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
MQN	Total	. 18	Minus		31	=		X\$ 9=		OR	X\$18=			
AME	Independent	*	Minus	***	8	= /		X40=		OR	X80=			
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	CLAIM		ļ	+135=	·	OR	+270≤				
								TOTAL ADDIT. FEE			TOTAL ADDIT. FEE			
		(Column 1)			mn 2)	(Column 3)		ADDIT. FEE			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
NDN	Total	* .	Minus	**		=		X\$ 9=		OR	X\$18=			
AME	Independent	* NTATION OF M	Minus	***	T CL AINA	=	-	X40=		OR	X80=			
<u> </u>	rino i Pheoe	NIATION OF M	OLITE DEF	PINDEN	T CLAIIVI		J.	+135=		OR	+270=			
								TOTAL ADDIT. FEE		OR	ADDIT. FEE			
	,	(Column 1)			ımn 2) HEST	(Column 3	_			_				
AMENDMENT C		REMAINING AFTER AMENDMENT		NUN PREVI	MBER IOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
Š	Total	*	Minus	**		=	_	X\$ 9=		OR	X\$18=			
AME	Independent	*	Minus	***	T 01 - 11 -	<u> </u>	4	X40=		OR	X80=			
	I	NTATION OF M					J	+135=		OR	+270=			
**	If the "Highest Nu	mn 1 is less than t mber Previously F mber Previously F	aid For" IN THI	S SPACE	is less tha	n 20, enter "20		TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE			
		nber Previously Pa						ound in the ap	propriate bo	x in co	olumn 1.			